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**COUNTY COUNCIL OF
NOTTINGHAMSHIRE.**



ANNUAL REPORT

ON THE

**HEALTH AND HEALTH SERVICES
OF THE COUNTY.**

FOR THE YEAR 1943.

CHRISTOPHER TIBBITS,

**M.R.C.S. (Eng.), L.R.C.P. (Lond.), D.P.H. (Oxon.),
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NOTTINGHAMSHIRE COUNTY COUNCIL.

PUBLIC HEALTH DEPARTMENT,
SHIRE HALL,
NOTTINGHAM,
November, 1944.

TO THE CHAIRMAN AND MEMBERS OF THE
NOTTINGHAMSHIRE COUNTY COUNCIL.

MY LORDS, LADIES AND GENTLEMEN,

I submit my Annual Report on the Health Services and the Health of the County for the year 1943, excluding the School Medical Service on which a separate Annual Report has been issued.

This Report is again in the abbreviated form required by the Ministry of Health.

Generally the health record for the County for the year 1943 was good, though a small outbreak of Influenza towards the end of the year caused some anxiety.

The estimated population, under war conditions, shows a further decrease to 472,300, a reduction of 8,900.

The various health "rates" are recorded and discussed in detail in the body of the Report.

The death rate rose from 10.2 to 11.2 (England and Wales 12.1) chiefly by reason of more deaths from Heart Disease, Cancer and Respiratory Diseases (excluding Tuberculosis).

The birth rate was the highest for nearly twenty years.

The death rate for Pulmonary Tuberculosis rose very slightly from 0.42 to 0.43, but was nevertheless the third lowest rate recorded.

The infant mortality rate for the whole County, 47.0, was the second lowest recorded and the County Council's Maternity and Child Welfare Area achieved a rate of 41.0.

The maternal mortality rate for the whole County and for the County Council's Maternity and Child Welfare Area was approximately the same, 2.9, a rise from 2.3 which compared badly with an exceptionally low rate for England and Wales of 1.84.

Analysis shows that Sepsis was the major factor in keeping up the rate in the County Council Area: whereas in the areas of the Autonomous Maternity and Child Welfare Authorities other complications of childbirth were mainly responsible.

Reference to page 13 shows how small are the figures involved and therefore how great is the influence of a single death on the rate.

The illegitimacy rate continued to rise during the year, having more than doubled since 1939.

Only part of this increase is real, as undoubtedly many of the births would have been legitimatised under normal peace-time conditions.

At the time at which I am writing (1944) certain steps have been taken to assist in the care of illegitimate children and of the unmarried mother.

Whilst hitherto this County has not shown the considerable increased incidence in Venereal Diseases which has been recorded nationally, the bulk figures for County Venereal Diseases Treatment Centres for the year 1943 do now indicate a considerable increase in the number of new cases.

In anticipation of such increase additional treatment facilities were instituted during the year at Worksop and Newark, and additional hospital beds were allocated for in-patient treatment.

The increased incidence occurred, however, mainly in the area served by the Nottingham Treatment Centre.

Early in the year Regulation 33B came into operation, dealing with the reporting and following-up of Venereal Diseases contacts with a view to treatment.

This measure is fully described, together with the preliminary results attained in the body of the Report.

The work is, of course, highly confidential in character and is the personal responsibility of the Medical Officer of Health.

Taking into consideration the heavy reductions in administrative, professional and clerical staff, the varied Health Services of the Council were well maintained and well used by the County population.

Indeed, in surveying the year's work it comes almost as a surprise to review how much new work was undertaken and how much progress was made despite the adverse circumstances.

Perhaps the most notable instances were the operation of Regulation 33B, above referred to, and the institution of the scheme for maintenance and other allowances under Memorandum 266/T for persons suffering from Pulmonary Tuberculosis.

The several "Rushcliffe" Scales for various categories of Nurses and Midwives were issued, adopted and operated during the year.

At the Sanatorium the new administrative building was opened and partly taken into use and progress was made in the erection of the new clinical and surgical block.

At the Village Settlement the Hostel for unmarried male Settlers was completed and occupied ; providing accommodation on the most modern lines for twenty-five Settlers and the necessary staff.

In Maternity and Child Welfare there was expansion of service by the opening of new Child Welfare Centres at Burton Joyce and Mattersey, and the provision of further Centres at Lambley, Wigsley and Cropwell Bishop, which were opened early in 1944.

Three further War-time Nurseries were planned and building started, two of which were ready for occupation at the end of the year.

In order to cope with the increasing need for ante-natal care an additional Assistant Woman Medical Officer was appointed at mid-year.

The principle of carrying out Venereal Diseases follow-up work through the County Almoner Service was adopted and the appointment of an Assistant Almoner approved.

At the Kilton Hill County Hospital, Worksop (now known as the County General Hospital) much additional work was undertaken both in connection with the Emergency Medical Service and for normal civilian purposes.

There was a considerable increase in maternity work undertaken and the number of cases dealt with by thoracic surgery rose from 64 to 140.

An innovation, forecasting the future co-ordination of Voluntary and Council Hospitals, was the completion of arrangements for the admission of patients for surgical treatment from the waiting lists of the Mansfield and District General Hospital and the Sheffield Royal Infirmary.

Staffing difficulties both here and at the Ransom Sanatorium were encountered throughout the year and much credit is due to the staffs for the loyal way in which they overcame all difficulties.

At the Kilton Hill County Hospital we lost the services of the Matron, Miss Lilian Evans, A.R.R.C., at the end of 1942. She had held that office with distinction and a broad humanity for thirty-five years and she is greatly missed by staff and patients alike.

With regard to Pulmonary Tuberculosis, it is unfortunately still necessary to emphasise the need for earlier diagnosis.

Too many cases are seen at the Dispensaries for the first time with well-established disease.

A welcome sign, however, is the increasing number of persons who attend for examination and who are found *not* to be suffering from the disease. Such precautionary attendance is a valuable index of public response to wise advice given by their family Doctors or members of the Staff of the Department.

Mass radiography, much "in the air" during this year 1943, may be expected to make a vital contribution to earlier diagnosis.

On behalf of the County Council every effort was made to secure the allocation of one of the mass radiography sets (the production of which was limited) for use by the County Service.

However, such efforts were unsuccessful but we were assured that a set which was being allocated to the City of Nottingham would also be available for the service of neighbouring County areas.

This has not proved to be the case in practice and our County set is still "in the air."

Nevertheless, in preparation for the time when a set becomes available, careful consideration has been given to the immediate needs which would result from earlier diagnosis and the Committees concerned have approved proposals for the provision of extensive additional accommodation at the Sanatorium for this purpose.

The Village Settlement workshops (Sherwood Industries) experienced a very difficult year owing to the various restrictions and stringencies affecting materials.

The making of portable buildings, previously our staple industry, had of course ceased to be practicable for some time and alternative products had to be planned and marketed.

Strange indeed are the devices of which adversity is the mother.

Could anyone have ever foreseen that a venture so vital, so subject to critical scrutiny, as a small-scale Village Settlement workshop would be kept in production and saved from ignominy and the pointing finger by a simple, humble, universal domestic stringency?

Yet so it was. A complete deficiency of *clothes pegs*!

We made clothes pegs by the thousand from scrap shorts of timber and never overtook the demand.

That tided us over to nearly the end of the year, together with a considerable output of wooden toys, for which we could only obtain unseasoned British timber.

Then a very good friend put us in touch with another but much more attractive domestic market in which there was acute stringency, the market for children's cots.

He showed us how to design, prepare jigs for and economically produce children's cots in large numbers.

With his help and the sympathetic response of the Timber Controller we were able to obtain good quality "scrap" timber (oddments left over from other manufacturing processes) and supplies of suitable hard woods for framing.

In a short time the workshops were turning out a very creditable article by mass production methods and an assured market was found.

The effect on the morale of the workers was most significant, as they found themselves turning out a product, despite their lack of skilled training and their restricted working capacity, of which they could justly be proud.

The Treatment of Cancer was the subject of anxious discussion during the year. The period for the submission of Schemes under the Cancer Act, 1939, having again been extended by the Minister of Health it was not necessary, nor was it practicable, to prepare formal arrangements.

Nevertheless the needs of the area were kept under review and useful discussions were held by the Council of the Nottinghamshire Branch of the British Empire Cancer Campaign with a view to improving and augmenting their Service and of securing closer co-operation with the Local Authorities.

In the last month of the year when an outbreak of Influenza threatened arrangements were made, in co-operation with the Local Medical War Committee, the Service Authorities and the Voluntary Bodies interested in Nursing Services, for temporarily augmenting the supply of Medical Practitioners and for establishing a service of trained volunteers to act as "Nursing Aids" in the homes of families affected.

The arrangements were speedily put into operation, but fortunately the call upon them was, in the event, not heavy.

This Report would be incomplete without reference to two inter-related aspects of the Maternity Service which have been difficult to handle and which will remain growing problems.

The first is the non-availability of persons for service as "Home Helps."

It has been virtually impossible to make use of the Council's "Home Help" Scheme because of this shortage, despite the offer of increased fees.

Secondly, for various war-time reasons, there has been a growing demand for admission to Maternity Hospital beds.

Part of this demand has been due to lack of available help in the home, although the home conditions were in themselves suitable for home confinement.

The pressure on maternity beds is consequently very heavy and the prospect of any large increase of accommodation under present conditions is remote.

It has therefore become important to reserve Hospital beds for those cases which, in their own interests, should not be confined at home.

This can only be done conveniently if "Home Helps" can be found for cases suitable for confinement at home.

A vicious circle and, I am afraid, an expanding one.

So far we have been able to adapt our arrangements without any adverse clinical incident, but we are working to fine limits and the utmost watchfulness is required.

Throughout the year a considerable amount of Health Education work has been carried out.

Emphasis has been laid, under present circumstances, on social and sex hygiene and the nature and dangers of Venereal Disease, but general Health Instruction has also been included. Meetings have been arranged at Factories, and in conjunction with Youth Organisations, Women's Institutes and groups of parents.

A Special Course was organised for Teachers.

This work has only been possible through the assistance proffered by Dr. Isabel Heath, Local Representative of the Central Council for Health Education, in carrying out the actual organising work to a programme approved by the Health Education Sub-Committee of the Public Health and Housing Committee.

I wish again to pay tribute to the Staff of the Department in all branches for their loyal and steady work throughout the year.

STATISTICS AND NATURAL AND SOCIAL CONDITIONS OF THE AREA.

Area (in acres) land and inland water	.. .. .	523,843
Population (Census 1921)—(actual 378,525)	.. .. .	*377,346
Population (Census 1931)—(actual 443,930)	.. .. .	*436,542
Number of Inhabited Houses (Census 1931)—(actual 108,758)	.. .. .	*106,634
Number of Families or separate Occupiers (Census 1931)— (actual 111,804)	.. .. .	*109,674
Average number of persons per house (Census 1931) (actual 4.1)	.. .. .	*4.1
Population (estimated to the middle of the year)	.. .. .	472,300
Estimated decrease during the year	.. .. .	8,900
Rateable Value (1st April)	.. .. .	£2,660,457
Estimated product of a penny rate (1st April)	.. .. .	£10,377
Population of the "Special Area" for Maternity and Child Welfare (estimated to the middle of the year)	.. .. .	201,580

*These figures relate to the area of the County as constituted at the 30th September, 1935, and exclude the population enumerated in the areas transferred to the City of Nottingham under the Nottingham Corporation Act, 1932, which came into effect on the 1st April, 1933.

VITAL STATISTICS.

The principal vital statistics for the year 1943, together with those for the previous year for comparison, are shown in tabular form below.

The General Death Rate of 11.2 is appreciably higher than the remarkably low figure of 10.2 for the previous year, but is nevertheless not in excess of the average rate for the previous four years.

The Birth Rate of 20.2 is the highest since 1924.

The Infantile Mortality Rate of 47 per thousand live births is the second lowest rate recorded for the County, the lowest rate being 46 per thousand live births in the year 1938.

The Death Rate of 0.54 for all forms of Tuberculosis shows a slight increase upon the previous year but is the fourth lowest rate recorded for the County. The previous lower rates were as follows :—

1942	..	0.51	1939	..	0.51	1937	..	0.52
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The Death Rate of 0.43 from Pulmonary Tuberculosis is the third lowest rate recorded, the previous lower rates being as follows :—

1942	..	0.42	1937	..	0.40
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The Death Rate of 1.49 from Cancer is the second highest rate recorded, the highest being 1.53 in 1939.

	1942.	1943.
1. Infantile Mortality.		
Rate per thousand live births—		
a. Whole County	48	47
b. Maternity and Child Welfare "Special Area"	37	41
c. England and Wales	49	49
2. Maternal Mortality.		
(i) Rate per thousand live births—		
a. Whole County	2.31	2.92
b. Maternity and Child Welfare "Special Area"	1.45	2.99
c. England and Wales	Not available.	
(ii) Rate per thousand total (live <i>and</i> still) births—		
a. Whole County	2.22	2.83
b. Maternity and Child Welfare "Special Area"	1.40	2.90
c. England and Wales	2.01	1.84
3. Puerperal Sepsis.		
(i) Rate per thousand live births—		
a. Whole County	0.12	1.08
b. Maternity and Child Welfare "Special Area"	—	1.90
c. England and Wales	Not available,	

(ii) Rate per thousand total (live *and* still) births—

<i>a.</i> Whole County	.. .. .	0.11	1.05
<i>b.</i> Maternity and Child Welfare "Special Area"	—	—	1.85
<i>c.</i> England and Wales	.. .. .	0.42	0.39

4. **General Death Rate.**

<i>a.</i> Whole County	.. .. .	10.2	11.2
<i>b.</i> England and Wales	.. .. .	11.6	12.1

5. **Birth Rate.**

<i>a.</i> Whole County	.. .. .	18.0	20.2
<i>b.</i> Maternity and Child Welfare "Special Area"	—	16.8	18.3
<i>c.</i> England and Wales	.. .. .	15.8	16.5

6. **Tuberculosis Mortality.**

Pulmonary—

<i>a.</i> Whole County	.. .. .	0.42	0.43
<i>b.</i> England and Wales	.. .. .	0.54	0.56

All Forms—

<i>a.</i> Whole County	.. .. .	0.51	0.54
<i>b.</i> England and Wales	.. .. .	0.66	0.67

7. **Deaths from Cancer.**

<i>a.</i> Whole County	.. .. .	1.34	1.49
<i>b.</i> England and Wales	.. .. .	1.83	1.90

The general death rate, birth rate, tuberculosis mortality rates and cancer death rate given above are per thousand of the estimated population.

The following table* gives the chief Vital Statistics for the years 1942 and 1943 for England and Wales (as supplied by the Registrar-General) and for the County of Nottingham for comparison.

	Birth rate per 1,000 of population.		Death Rate per 1,000 of population.		Deaths under one year per 1,000 births.	
	1942	1943	1942	1943	1942	1943
England and Wales	15.8	16.5	11.6	12.1	49	49
126 County Boroughs, etc.	17.3	18.6	13.3	14.2	59	58
148 Smaller Towns	18.4	19.4	12.1	12.7	46	46
London, Admin. County	14.0	15.8	13.9	15.0	60	58
County of Nottingham	18.0	20.2	10.2	11.2	48	47
Aggregate Urban Districts	18.2	20.0	10.4	11.5	51	48
Aggregate Rural Districts	17.4	18.8	9.1	10.7	41	43
Special Area for Maternity and Child Welfare	16.8	18.3	9.8	11.3	37	41

These rates are calculated on the estimated populations supplied by the Registrar-General.

*The rates supplied by the Registrar-General for England and Wales, County Boroughs, Smaller Towns and London, are provisional figures based on Weekly and Quarterly Returns.

BIRTHS.

Nine thousand, two hundred and fifty-five live births were registered in the County during 1943, giving a rate of 20.2 (1942, 18.0), which is the highest since 1924.

Males exceeded females by 335.

The number of live births registered in the "Special Area" for Maternity and Child Welfare was 3,684 and the rate 18.3, compared with 16.8 for the previous year.

The number of illegitimate births registered in the County was 541, giving a rate of 1.15 per thousand of the population and 58.5 per thousand registered live births.

The number of illegitimate births continues to increase, the figures for the last five years being as follows :—

1939	..	261	1940	..	287	1941	..	339
		1942	..	442	1943	..	541	

In reviewing these figures regard should be had, of course, to the current abnormal circumstances. Many of the births included in the figures above would no doubt have been legitimised had not present conditions made such a course impossible.

DEATHS.

The number of deaths registered during 1943 was 5,309 (2,802 males and 2,507 females), giving a rate of 11.2 per thousand of the estimated population compared with 10.2 for the previous year.

The corresponding rate for England and Wales for 1943 was 12.1 (1942, 11.6).

Principal Causes of Death.

The chief causes of death for the whole County in order were as follows :—

Heart Disease	..	..	..	..	..	..	1,219
Cancer, Malignant Disease	..	..	..	..	..	..	705
Diseases of the Respiratory System (excluding Tuberculosis)	..	..	..	..	..	..	702
Intra-cranial Vascular Lesions	..	..	..	..	..	..	560
Tuberculosis, all forms	..	..	..	..	..	..	255
Congenital Malformations, Birth Injuries, Infantile Diseases, Premature Births	..	..	..	..	..	..	237

Deaths of Infants under one year of age.

The number of infants who died during 1943 before reaching the age of one, and the rate per thousand live births, legitimate and illegitimate, were as follows :—

No. of deaths under one year of age.			Rate per thousand live births.		
Males.	Females.	Total.	Legitimate.	Illegitimate.	Total.
238	194	432	46	54	47

The rate of 47 per thousand total live births is the second lowest ever recorded in the County.

COUNTY GENERAL HOSPITAL, WORKSOP.

The statistics relating to the work of the County General Hospital, formerly known as the Kilton Hill County Hospital, during the year were as follows :—

No. of patients treated during year	..	..	..	912
No. of patients in residence on 1st January	..	..		37
No. of admissions (including infants born in Hospital)				875
No. of births (a) live births	..	..	..	161
(b) still births	..	..	..	12
No. of discharges (including infants born in the Hospital)				772
No. of deaths	..	..	..	76
No. of patients in residence on 31st December			..	64

During 1943 the Hospital Staff performed eighty-seven major and 133 minor operations, fifty-two tonsil and adenoid operations, whilst a further 165 operations were carried out by the Visiting Specialists.

Details of the operations performed in respect of cases of Pulmonary Tuberculosis and other Intra-Thoracic conditions during 1943 are given below :—

Cases of Pulmonary Tuberculosis.

Adhesion Division	..	..	..	..	..	52
Bronchoscopy	..	..	..	..	..	2
Korrekturplasty	..	..	..	..	..	2
Phrenicectomy	..	..	..	..	..	9
Phrenic Crush	..		..	..	..	13
Thoracolysis	..	..	..	..	..	1
Thoracoplasty	..	..	..	..	..	44
Thoracoscopy	..	..	..	..	..	11
						<hr/> 134 <hr/>

Other Intra-Thoracic Conditions.

Bronchoscopy	..	..	..	..	..	1
Rib Resection	..	..	..	..	..	2
						<hr/> 3 <hr/>

The figures shown include ninety-three operations performed on cases from the City of Nottingham, under the arrangement entered into last year whereby all tuberculous cases from City or County are treated at the County General Hospital (after admission to and investigation at the City or County Sanatorium) and all non-tuberculous cases from City and County at the City Hospital, Nottingham.

MATERNITY AND CHILD WELFARE.

The County Council Area for Maternity and Child Welfare.

The "Special Area" comprises the six Rural Districts and the Urban Districts of Carlton, Eastwood and West Bridgford, as constituted under the County of Nottingham Review Order, 1934.

Puerperal Pyrexia.

The number of cases of Puerperal Pyrexia notified during the year were as follows :—

Whole County.	"Special Area."
65	16

The services of a Consultant under the County Council's scheme were requested and provided in four cases.

Maternal Mortality.

The maternal mortality rate per thousand live births for the whole County was 2.92 (1942, 2.31) and in the County Council "Special Area" for Maternity and Child Welfare 2.99 (1942, 1.45).

The rate for Puerperal Sepsis only per thousand live births for the whole County was 1.08, and in the County Council "Special Area" for Maternity and Child Welfare 1.90.

The maternal mortality rate per thousand total (live *and* still) births was 2.83 (1942, 2.22) for the whole County and 2.90 (1942, 1.40) in the "Special Area," compared with 1.84 (1942, 2.01) for England and Wales.

For Puerperal Sepsis only the rates per thousand total (live *and* still) births were, whole County 1.05, County Council "Special Area" 1.85, and England and Wales, 0.39.

The total number of maternal deaths registered in the whole County was twenty-seven, ten from Puerperal Sepsis and seventeen from other causes.

Of the total of twenty-seven deaths recorded eleven occurred in the County Council "Special Area" and the remaining sixteen were distributed as follows :—

DISTRICT.	CAUSE OF DEATH.	
	SEPSIS.	OTHER.
Mansfield Borough	—	3
Worksop Borough	1	4
East Retford Borough	—	1
Beeston and Stapleford Urban	1	—
Kirkby-in-Ashfield Urban	—	1
Mansfield Woodhouse Urban	—	1
Sutton-in-Ashfield Urban	1	3
	—	—
	3	13
	—	—

The eleven deaths in the County Council "Special Area" were located as follows :—

DISTRICT.	CAUSE OF DEATH.	
	SEPSIS.	OTHER.
West Bridgford Urban	—	1
Basford Rural	2	1
East Retford Rural	1	—
Newark Rural	1	1
Southwell Rural	2	1
Worksop Rural	1	—
	—	—
	7	4
	<u> </u>	<u> </u>

Health Visiting.

The extent of this work is statistically indicated in the following table :—

First visits to Infants and Children	4,402
Re-visits to Infants and Children	76,376
Visits to Expectant Mothers	6,847
Visits to Post-Natal Cases	96
	<u> </u>
	87,721
	<u> </u>

Child Welfare Centres.

There were forty-eight Centres in the "Special Area" at the end of the year, and the attendances made, together with the number of medical consultations afforded during the year, are shown below :—

ATTENDANCES :

Infants and Children under five years of age ..	77,895
Mothers	73,259
Expectant Mothers	602
Post-Natal Mothers	36

MEDICAL CONSULTATIONS :

Infants and Young Children	21,824
Expectant Mothers	392
Post-Natal Mothers	35

Ante-Natal Clinics.

There are now forty-seven Centres at which ante-natal examinations can be properly carried out. The attendances at the Ante-Natal Clinics during 1942 were as follows :—

	ANTE-NATAL.	POST-NATAL.
Individuals	2,261	279
Attendances	8,254	365

Dental Treatment for Expectant and Nursing Mothers and Children under five years of age.

The number of expectant or nursing mothers referred by the Medical Officers to the Dental Officers for inspection during 1943, and the number actually treated, were as follows :—

No. referred for inspection	.. .. .	963
No. for whom treatment was commenced	.. .. .	503
No. refusing treatment	.. .. .	410
No. who left County, found to be ineligible, or for other reasons not treated	.. .. .	50

Children under school age are referred to the Dental Officers by Medical Officers in charge of Welfare Centres and by Health Visitors, the numbers of such children dealt with being as follows :—

No. referred	.. .. .	179
No. undergoing course of treatment	.. .. .	163
No. of attendances	.. .. .	410

The treatment carried out for these toddlers consisted mainly of the extraction of aching or septic " milk " teeth. In certain instances, however, it was considered desirable to insert metal fillings in small cavities in molar teeth, seventy-three such fillings being inserted during the year.

Child Life Protection.

The number of children's names on the register on 1st January, 1943, was twenty-nine. The names of twenty-one children were removed and thirty-two names were added to the register during 1943, leaving a total of forty names on the register on 31st December, 1943.

Midwives Act, 1936.

The number of Midwives employed directly by the County Council at the end of 1943 was fifty-six whole-time and one part-time, as compared with fifty-three whole-time at the end of 1942. Sixty-two District Nurse Midwives were employed in the County at the end of 1943 as compared with sixty-four the previous year.

The following is a summary of the work done by the County Midwives during the year :—

CASES.					
No. BOOKED.			No. DELIVERED.		
Midwifery	..	3,352	At home	..	3,770
Maternity	..	968	At hospital	..	172
		<hr/>			<hr/>
		4,320			3,942
		<hr/>			<hr/>
VISITS.					
ANTE-NATAL :					
Home	..	..	..	26,997	
Clinic	..	..	..	4,597	
Delivery	..	..	..	4,036	
Lying-in	..	..	..	64,999	
				<hr/>	
				100,629	
				<hr/>	

SANITARY CIRCUMSTANCES OF THE AREA.

Prevention of Pollution of Rivers and Streams.

1. *Analyses of Samples.*

Summary of analyses of samples examined in the County Laboratory during 1943 :—

Sewage Disposal Works :

Good effluents	..	..	..	..	..	65	
Fair effluents	..	..	..	..	..	39	
Unsatisfactory effluents			..	..	..	17	
Bad effluents	..	..	..	..	..	23	
						—	144
Other effluents	..	..	..	..	..	7	
Rivers and streams	..	..	..	..	..	—
Observation samples	..	..	..	..	..	53	
						—	60
					TOTAL	..	<u>204</u>

2. *Visits of Inspection.*

The visits paid during the year were as follows :—

Sewage disposal works	..	..	..	..	381
Other discharges	..	..	..	..	224
				TOTAL	.. <u>605</u>

Work undertaken by County Health Inspectors.

The following is a brief summary of the work undertaken during the year :—

	No. of VISITS PAID.
Investigation of possible sources of pollution of public water supplies	1,008
Investigation of complaints of sanitary defects received from Health Visitors, County Residents, etc.	211
Investigation of sanitary circumstances generally (including interviews with Officers of County Districts)	554
Matters in connection with Civil Defence ..	417
Dairies and Cowsheds :—	
No. inspected	73
Housing :—	
No. of houses inspected	247
Test checks of compliance with conditions of grant and inspections following applications for grant under Housing (Rural Workers) Acts, 1926 and 1938	144

Water Supplies.

Particulars of the water supplies in the several County Districts, and the proportion of the dwelling houses and population in each District supplied by public mains are given in the following tabular statement :—

WATER SUPPLIES.

DISTRICT.	PARTICULARS OF SUPPLIES FROM WATERWORKS:				PROPORTION OF HOUSES AND POPULATION CONNECTED TO PUBLIC MAINS.
	QUALITY.	SUFFICIENCY.	SUPPLY.	PLUMBO-SOLVENCY.	
MANSFIELD BOROUGH ..	Satisfactory	Satisfactory	Constant	Satisfactory	All houses are connected to the Corporation supply with the exception of a few outlying farms and cottages.
NEWARK BOROUGH ..	Do.	Do.	Do.	Do.	100%
EAST RETFORD BOROUGH ..	Do.	Do.	Do.	Do.	100%
WORKSOP BOROUGH ..	Do.	Do.	Do.	Do.	98.8% of the dwelling-houses and 98.6% of the population are supplied from waterworks.
ARNOLD URBAN DISTRICT ..	Do.	Do.	Do.	Do.	100%
BEESTON AND STAPLEFORD URBAN DISTRICT	Do.	Do.	Do.	Do.	The whole District excepting a few houses dependent on wells is adequately served by public mains.
CARLTON URBAN DISTRICT ..	Do.	Do.	Do.	Do.	100%
EASTWOOD URBAN DISTRICT	Do.	Do.	Do.	Do.	With the exception of three outlying houses the whole of the District is supplied by public mains.
HUCKNALL URBAN DISTRICT	Do.	In certain areas pressure is not altogether adequate.	Do.	Do.	Most of the houses are served by a piped supply from the waterworks. There are some isolated houses and farms which are dependent upon wells.
KIRKBY-IN-ASHFIELD URBAN DISTRICT	Do.	Satisfactory	Do.	Do.	With the exception of ten out-lying cottages the whole of the houses are connected to public mains.
MANSFIELD WOODHOUSE URBAN DISTRICT	Do.	Do.	Do.	Do.	The whole of the houses are connected to public mains with the exception of several out-lying farms and cottages.

WATER SUPPLIES—*continued.*

DISTRICT.	PARTICULARS OF SUPPLIES FROM WATERWORKS :				PROPORTION OF HOUSES AND POPULATION CONNECTED TO PUBLIC MAINS.
	QUALITY.	SUFFICIENCY.	SUPPLY.	PLUMBO-SOLVENCY.	
SUTTON-IN-ASHFIELD URBAN DISTRICT	Satisfactory	Insufficient for present population and industries.	Normally constant but on several occasions the supply from the Council's waterworks has been intermittent.	Satisfactory	All houses are connected to the Council's mains except in a few isolated cases.
WARSOP URBAN DISTRICT	Do.	Satisfactory	Constant	Do.	Apart from 5 farms and 8 cottages in the Sookholme area the whole of the houses are connected to public mains.
WEST BRIDGFORD URBAN DISTRICT	Do.	Do.	Do.	Do.	100%
BASFORD RURAL DISTRICT	Do.	Do.	Do.	Do.	12,694 houses have a piped water supply and 878 houses are dependent upon wells.
BINGHAM RURAL DISTRICT	Do.	Do.	Do.	Do.	19 parishes are supplied by public mains and 3 parishes are partially supplied. The remaining 18 parishes depend upon shallow wells.
NEWARK RURAL DISTRICT	Do.	Do.	Do.	Do.	The parishes of Balderton, Coddington, Farndon, Hawton, Langford, North Collingham, South Collingham and Winthorpe, are supplied by the Newark Corporation. The remaining 21 parishes depend upon shallow wells. Approximately 55% of the houses in the Rural District are connected to public mains.

WATER SUPPLIES—continued.

DISTRICT.	PARTICULARS OF SUPPLIES FROM WATERWORKS:				PROPORTION OF HOUSES AND POPULATION CONNECTED TO PUBLIC MAINS.
	QUALITY.	SUFFICIENCY.	SUPPLY.	PLUMBO-SOLVENCY.	
EAST RETFORD RURAL DISTRICT	Satisfactory	Satisfactory	Constant	Satisfactory	78% of the houses and of the population are provided with a piped water supply. 50% of the houses which are not provided with a piped supply are within 100 yards of an existing public main. The remaining 578 houses are isolated premises some considerable distance from a public water main. There is a piped water supply available in all parishes except the Parish of West Burton which is a small parish containing only 11 widely separated farms and houses.
SOUTHWELL RURAL DISTRICT	Do.	Do.	Do.	Do.	90.5% of the houses are connected to public water mains. Of the houses which are dependent upon wells 515 have their curtilage within 100 yards of a water main available for supply.
WORKSOP RURAL DISTRICT	Do.	Satisfactory with the exception of a private supply from a deep borehole to 12 houses in the Parish of Wallingwells.	Constant in all cases with the exception of a private supply at Wallingwells where the quantity now pumped has proved to be inadequate.	Do.	94.8% of the dwelling-houses and 94.4% of the population are supplied from public mains.

ROUTINE MILK SAMPLING.

Type of Sample.	By whom collected.	No. of farms involved.	No. of cows involved.	No. of Samples submitted for biological examination.	RESULT OF BIOLOGICAL EXAMINATION. No. of SAMPLES.		
					Positive.	Negative.	Not Tested.
Mixed herd (non-graded herd)	County Milk Samplers ..	3,235	31,136	1,087	50	830	207
Accredited and Tuber- culin Tested	County Food and Drugs Inspectors	471	10,123	376	17	304	55
Imported Milks ..	Do.	—	—	31	1	25	5
School Milks	County Health Inspec- tors	—	—	119	1	96	22
	TOTALS ..	3,706	41,259	1,613	69	1,255	289

INSPECTION AND SUPERVISION OF FOOD.

Food and Drugs Act, 1938.

The arrangements for herd milk sampling, detailed in my Annual Report for 1938, have been continued, though with a depleted staff on account of War Service calls. Particulars of the samples collected during the year are shown in the Table on the preceding page.

Check Sampling of School Milk Supplies.

The number of school milk samples taken on school premises during the year by the County Health Inspectors and forwarded to the Institute of Animal Pathology, Cambridge, for biological examination for the presence of tubercle were as follows :—

No. of Samples.	RESULT OF BIOLOGICAL EXAMINATION.				
	Positive.		Negative.		Not Tested.
	No.	Percentage.	No.	Percentage.	
119	1	1.03	96	98.97	22

Since the introduction of the arrangements, on the 18th June, 1935, which provide for at least two samples of milk to be taken each year from that delivered at schools by each supplier, a total of 821 samples has been taken and submitted to biological examination. Of this number 753 were examined, 745 were negative and eight were positive.

During the year, three samples of milk have been taken from that delivered to schools by each supplier.

INFECTIOUS DISEASES.

The total number of cases of Infectious Disease, other than Tuberculosis, and the deaths resulting amongst the County civilian population, were as follows :—

DISEASE.						CASES NOTIFIED.	DEATHS.
Smallpox	..	..	..	..	..	—	—
Scarlet Fever	..	..	..	..	..	1,161	1
Diphtheria	..	..	..	..	..	212	15
Typhoid and Paratyphoid Fevers	..	..	..	..	..	13	1
Puerperal Pyrexia	..	..	..	..	..	64	—
Pneumonia	..	..	..	..	..	575	275
Cerebro-Spinal Fever	..	..	..	..	..	26	11
Erysipelas	..	..	..	..	..	90	*
Ophthalmia Neonatorum	..	..	..	..	..	31	—
Dysentery	..	..	..	..	..	6	*
Acute Poliomyelitis and Polio-encephalitis	..	..	..	..	..	5	4
Malaria	..	..	..	..	..	1	*
Whooping Cough	..	..	..	..	..	1,018	12
Measles	..	..	..	..	..	4,998	20
TOTAL						8,200	339

*Deaths from these diseases are not shown separately in the return received from the Registrar-General.

Diphtheria Immunisation.

Particulars have been given in my previous Reports of the work undertaken, in co-operation with the County District Councils, in connection with the Diphtheria Immunisation campaign.

The same policy was actively pursued throughout the year under review; the actual work of immunisation being undertaken by the County District Medical Officers of Health whilst the County Council provided effective co-operation by allowing the use of School, Clinic and Centre premises and affording the practical assistance of the Medical and Outdoor Nursing Staffs.

The following Table, which has been compiled from the Returns submitted by the County District Medical Officers of Health to the Ministry of Health, shows the percentage of children who had completed a course of immunisation on the 31st December, 1943, in the various County Districts, together with comparative figures for the year 1942 :—

DISTRICT.	PERCENTAGE OF CHILDREN IMMUNISED.			
	1942.		1943.	
	Under 5	Aged 5-15	Under 5	Aged 5-15
Boroughs.				
MANSFIELD	44.5	61.0	29.6	66.1
WORKSOP	58.8	89.8	70.0	94.6
NEWARK	45.0	73.0	60.0	75.0
EAST RETFORD	63.0	77.4	73.7	86.3
Urban Districts.				
ARNOLD	50.3	94.0	76.5	100.0
BEESTON AND STAPLEFORD ..	41.3	69.9	48.0	66.0
CARLTON	63.3	59.7	87.0	70.0
EASTWOOD	87.2	79.0	36.2	78.0
HUCKNALL	74.0	77.0	87.0	85.0
KIRKBY-IN-ASHFIELD ..	54.0	90.4	70.0	87.1
MANSFIELD WOODHOUSE ..	42.0	71.0	71.3	93.0
SUTTON-IN-ASHFIELD ..	54.0	88.0	57.0	90.0
WARSOP	59.0	85.0	77.0	94.0
WEST BRIDGFORD	54.0	57.0	77.0	70.0
Rural Districts.				
BASFORD	39.7	77.7	58.6	81.2
BINGHAM	48.0	66.0	65.0	86.0
WORKSOP	35.8	82.7	60.7	87.4
EAST RETFORD	56.5	78.1	74.2	82.5
NEWARK	70.0	74.0	75.0	76.0
SOUTHWELL	60.0	75.0	76.0	78.0

In all but two instances the proportion of children under five considered immunised at the 31st December, 1943, was higher than that of the previous year; whilst in the case of children aged five—fifteen the figures were higher for all Districts except three.

It is satisfactory to note that the standard of immunisation has thus been maintained, and indeed in the majority of Districts improved upon; but a more pleasing picture is the increase in the number of Districts in which the desired proportion of the child population has undergone a course of immunisation.

The highest proportions naturally are to be found in the five-fifteen age group which now absorbs the toddlers of two and three years ago, upon whom attention was more directly focussed at the beginning of the campaign.

It should also be borne in mind that the “under five” population includes infants under one year of age whereas artificial immunisation is rarely undertaken before a child reaches its first birthday.

In the Arnold district the whole of the children in the five-fifteen group have been immunised.

In four other Districts ninety per cent. or more have been treated; seven Districts claim a percentage of over eighty; six Districts show seventy per cent. or more whilst in the remaining two Districts the percentage was sixty-six.

As regards the children under five years of age the highest percentage was eighty-seven which applied in two Districts. In ten Districts the percentage was seventy or more; in three Districts between sixty and seventy; in two Districts between fifty and sixty and in the remaining three less than fifty per cent. had been immunised. The lowest percentage was 29.6 in the Borough of Mansfield.

Deaths.

The number of deaths occurring from diphtheria in the County during the past five years were as follows :—

YEAR.	AGED UNDER 15.	AGED 15 AND OVER.	TOTAL.
1939	22	3	25
1940	21	—	21
1941	33	2	35
1942	10	1	11
1943	15	—	15

Scabies Order, 1941.

The arrangements outlined in detail in my Report for 1942 were in operation throughout 1943.

The number of cases reported, however, showed a considerable reduction as compared with that of the previous year, the actual figures being 1,701 during 1943 (1,046 in the Urban Districts, and 655 in the Rural Districts) as against 2,483 (1,853 Urban Districts and 630 Rural Districts) during 1942.

The number of cases reported to have been treated was 1,053 or 61.9% in 1943, as compared with 2,370 or 95.4% in 1942.

The total number of cases reported to the County District Medical Officers of Health by members of the County Council's staff during 1943 was 976 and in 1942 1,176.

The number of cases afforded in-patient treatment during the year at the cost of the County Council was seventy-two, including six cases admitted in 1942 whose period of treatment continued into 1943.

PUBLIC VACCINATION.

The undermentioned figures relate to the work of the Vaccination Officers during the calendar year 1942 :—

No. of cases in Birth Lists received by Vaccination Officers	8,267
No. of Certificates of Successful Vaccination received ..	2,555
No. of Statutory Declarations of Conscientious Objection received	4,756
No. of prosecutions	Nil

TREATMENT OF TUBERCULOSIS.

During 1943, the number of deaths attributable to Tuberculosis was 255, 202 from Pulmonary Tuberculosis, and fifty-three from other forms.

The Pulmonary death rate per thousand of the population was 0.43 for the County compared with 0.56 for England and Wales, whilst the rate for all forms was 0.54 for the County and 0.67 for England and Wales.

Dispensary Organisation—Attendances, New Cases and "Contacts."

The following table shows the number of new cases, including "Contacts," examined at the five Dispensaries during the year and the preceding year, together with the total attendances made by all patients :—

YEAR	Total Attendances (All Cases)	PERSONS EXAMINED FOR FIRST TIME			No. of Contacts examined
		Total	No. found definitely Tuberculous	Percentage	
1942	6,062	1,616	414	25.6	290
1943	6,371	1,819	385	21.2	349

The percentage distribution of the cases found to be definitely tuberculous as indicated above was as follows :—

	MALE.	FEMALE.
Pulmonary Tuberculosis—Adults	39.8	35.8
Children	3.9	1.8
Non-Pulmonary Tuberculosis—Adults	4.9	3.4
Children	6.8	3.6

Laboratory Work.

The total number of specimens examined in connection with the Dispensaries was 1,151 in 1943, compared with 945 in 1942. Four hundred and three examinations were also made for the purposes of the Public Health (Tuberculosis) Regulations, 1930.

Ministry of Health Memorandum 266/T.

This Memorandum issued by the Ministry of Health in May, 1943, deals comprehensively with the duties of Tuberculosis Authorities in connection with the measures to be taken to check the spread of Tuberculosis and sets out in detail the procedure to be followed, particularly in relation to examination and diagnosis, treatment and welfare.

The main points dealt with in the Memorandum, which is confined to Pulmonary Tuberculosis and does not deal with other forms of the disease, includes the use of miniature radiography in enabling early diagnosis to be made, the functions of Care Committees, rehabilitation measures in Sanatoria, the re-instatement of patients into industry, including the setting-up of local informal Committees consisting of representatives of the Local Authority, the Ministry of Labour and National Service, employers and employed, and the payment of allowances to certain classes of patients in order to mitigate the financial difficulty involved by the acceptance of treatment.

Miniature Radiography.

Existing supply difficulties have limited the distribution of sets throughout the country and although a set was allocated to the City of Nottingham it has not so far been practicable to utilise this for County residents, except those working in City Factories. Urgent representations have however been made to the appropriate Government Department for the allocation of a miniature radiography unit for use in the County area.

Functions of Care Committees.

With regard to Care Committees, the memorandum suggests that although it is anticipated that the new scheme of allowances should greatly reduce the need for expenditure on the provision of extra nourishment for patients or their dependents, such Committees will still be able to fill a useful purpose in providing :

- (a) ancillaries to medical treatment, such as additional comforts for the patients, extra clothing required for sanatorium life, extra nourishment for patients or their dependents, etc. ;

- (b) training for employment, and later finding them jobs by approaching employers in the area ;
- (c) help with the removal of patients and their families to better homes, or assistance with bedding to enable patients and contacts to sleep apart, thus preventing the spread of infection.

Rehabilitation measures in Sanatoria.

Attention is drawn to the recommendation of the Tomlinson Committee on Rehabilitation advocating the further development of rehabilitation measures in the case of patients who have reached a suitable stage in their treatment.

Among the measures mentioned are occupational therapy, provision of workshops, employment of patients as temporary members of the staff as Gate Porters, Gardeners or in assisting with nursing or domestic work.

Assistance to Individuals.

Prior to the issue of Memo. 266/T assistance was available to individuals in one or more of the following ways :—

- (1) In the case of insured persons, under the National Health Insurance Scheme.
- (2) By Public Assistance Authorities.
- (3) By Tuberculosis Authorities under their powers to make such arrangements as they think desirable for the treatment of tuberculosis or for the after-care of persons who have suffered from tuberculosis.
- (4) Disability Pensions or Treatment Allowances.

Experience has shown however that the assistance available through these channels has not always been adequate or appropriate. The Minister of Health therefore decided to authorise a special measure of Exchequer assistance to Tuberculosis Authorities in respect of expenditure incurred by them in making grants to patients receiving approved treatment.

The object of the arrangements was to provide adequate maintenance for patients undergoing treatment and their dependents, and to enable specific standing charges to be met while the breadwinner is undergoing treatment.

The assistance in respect of which expenditure is re-imbursed by the Exchequer consists of :

- (1) a standard rate of maintenance (described as “ maintenance allowances ”) payable without inquiry into means (beyond inquiry to establish whether the employers are continuing to pay any wages during sickness and, if so, to what extent, the amount of any National Health Insurance benefit payable, and the amount of any treatment allowance or disability pension or pension allowances received from the Ministry of Pensions) to which will be added actual rent and rates up to a maximum of 15s. per week ;

- (2) additional payments (described as "discretionary allowances") at the discretion of the Authority (acting normally through an appropriate officer) and after need has been established, towards meeting exceptional commitments, in the way of charges incurred for high rent, mortgage, education, insurance, hire purchase or the like, which were not unreasonably incurred before the need for treatment was known but which cannot be met unless some additional grant is made ;
- (3) other additional payments (described as "special payments") at the discretion of the Authority (acting normally through an appropriate officer) and after need has been established, in respect of :
 - (a) reasonable travelling expenses incurred by near relatives in visiting a patient in an Institution ;
 - (b) increased expenditure involved in obtaining domestic help from outside the household where the patient is the housewife ;
 - (c) in the case of persons without dependents a reasonable allowance not exceeding 5s. a week for pocket money for patients undergoing approved treatment in an institution and an allowance in respect of continuing commitments for rent, rates, insurance or hire purchase charges where such payments cannot be met out of National Health Insurance benefit or other available sources of income.

So far as the functions of Care Committees are concerned the Nottingham and Notts. Association for the Prevention of Consumption are alive to the problems involved. Their full co-operation in the new scheme of allowances to individuals has been obtained and the services of the Secretary of the Association are utilised in dealing with applications for allowances from patients attending the Nottingham Dispensary.

The rehabilitation of patients has received practical attention at the Ransom Sanatorium for many years.

Occupational therapy was already undertaken and a comprehensive scheme was approved during the year.

Employment in Workshops has been provided by the establishment of the Village Settlement and this is of course a progressive scheme.

The employment of ex-patients on the staff as labourers, gardeners and orderlies has been practised for many years.

As suggested in the memorandum an informal Joint Committee, constituted of representatives of employers, employed, the Ministry of Labour and National Service and the County Council has been set up to discuss the whole problem of the replacement of patients in industry and to formulate proposals for planned arrangements for dealing with the matter.

The Scheme for the payment of allowances and grants came into operation in this County on the 6th September, 1943.

The County Medical Officer is responsible for the detailed administration of the Scheme. The assessing of the allowances to be afforded is carried out in the Public Health Department, the actual payments being made weekly by cheques through the post by the County Treasurer.

The County Almoner Service was extended by the creation of the post of Senior County Almoner and the appointment of an Assistant County Almoner in order to deal with applications for allowances and to give any necessary advice to patients in connection with the Scheme.

Permission was also given by the Nottingham and Notts. Association for the Prevention of Consumption for the Secretary to participate in the work in connection with patients based on Nottingham Dispensary.

From 6th September to the end of the year the actual number of applications received was as indicated below :—

Maintenance Allowances	123
Discretionary Allowances	16
Special payments for Domestic Help	4
Special payments for Pocket Money	16
Special payments for Continuing Commitments	2

Of these the number in which payments were approved and the number rejected were as follows :—

	PAYMENTS APPROVED.	APPLICATIONS REJECTED.
Maintenance Allowances	99	21
Discretionary Allowances	7	7
Special payments for Domestic Help	—	4
Special payments for Pocket Money	7	9
Special payments for Continuing Commitments	2	—

Three applications for Maintenance Allowances and two for Discretionary Allowances were pending at the end of the period.

The total expenditure for the period in question was £1,323 6s. 11d.

The reasons for rejection were :—

Maintenance Allowances.

In chronic category	8
Income in excess of allowances	3
Capable of full employment	3
In receipt of treatment allowances from Ministry of Pensions	2
Not eligible	2
Discharged from Sanatorium for more than eighteen months	1
Died	1
Took own discharge from Sanatorium	1

Discretionary Allowances.

Wife working—circumstances good	..	..	..	4
In receipt of treatment allowances from Ministry of Pensions				1
In chronic category	..	..	..	1
Took own discharge from Sanatorium	..	..	..	1

Special Payments.**1. FOR DOMESTIC HELP.**

Circumstances good	..	..	..	..	3
Domestic Help not being provided—house closed	..			..	1

2. FOR POCKET MONEY.

Family circumstances good	..	..	..	..	5
In receipt of National Health Insurance Benefit	..			..	4

X-Ray Examinations.

The X-Ray examinations made in connection with the Dispensaries during the year 1943 were as follows :—

Chest Photographs	..	..	..	..	1,200
Bones and Joints Photographs	..	..	..		8
Screenings	..	..	..	..	85

Extra Nourishment.

Cod liver oil and allowances of extra milk are distributed on the recommendation of the Tuberculosis Officers as strictly as possible from a treatment standpoint and not as a measure of relief.

Twenty-eight patients were granted extra nourishment in this way during 1943 at an approximate cost of £116.

Shelters.

The number of shelters owned by the County Council is ten and use of these was made by eight patients during the year.

Home Visiting by the Tuberculosis Officers.

The number of domiciliary visits paid by the Tuberculosis Officers during the year totalled 1,422, as follows :—

Domiciliary Visits	..	..	..	..	..	1,333
Visits for purposes of Consultation				..	..	89

Home Visiting by Health Visitors.

Four thousand eight hundred and ninety-seven domiciliary visits were paid by members of the Nursing Staff during the year, compared with 5,916 in 1942.

After-Care.

The work of the Nottingham and Nottinghamshire Association for the Prevention of Consumption, who carry out after-care work on behalf of the County Council, receiving a grant at the rate of £200 per annum, has been fully described in previous Annual Reports. The number of cases who applied or were referred to the Association during the year 1943 was 136.

New Cases and Mortality.

The number of new cases recorded in the Registers of the Medical Officers of Health of the County Districts and the number of deaths due to Tuberculosis according to the Registrar-General's statistics during the year are given in Table I in the Appendix.

Institutional Care.

The following is an extract from the report on the work of the Ransom Sanatorium received from Dr. E. Firth, the Medical Superintendent:—

THE RANSOM SANATORIUM.

“ During the year under review no major changes have taken place in the routine of the Sanatorium.

Treatment continues to be based on well tried and proved methods such as adequate bed rest and graduated exercise together with special methods of lung collapse, either temporary or permanent, whenever possible.

We still see far too many cases of advanced bilateral disease, for whom little or nothing can be done, and this position is likely to persist until the population as a whole cease to regard tuberculosis as a disease for which death is the only outcome ; it cannot be stressed too often that early cases of tuberculosis adequately treated can recover, and that it is the duty of the public to take advantage of all the facilities which are available to diagnose the disease in its early stages and thus give the Tuberculosis service as a whole the chance of doing its job properly on their behalf.

The staffing problem continues to be very acute, and on the Nursing side our main shortage has been in trained staff who are so necessary if the wards are to be run efficiently ; Student Nurses have been less difficult to obtain but the bogey of infection has not yet been dispelled and this limits recruitment.

There has been a continued and severe shortage of Domestic Staff, but we are hoping that the opening of their new quarters in the Administrative Block will attract staff, for it is first class accommodation and none better will be found anywhere in the Country.

The Kitchen Block and Clinical Block are not yet completed but we are looking forward to the day when we need no longer share the Sanatorium with the builders.

Mr. Mason has continued during the year as Thoracic Surgeon and has made most valuable contributions to our work, and the patients of this County are fortunate in having available his wide knowledge and operating skill.

Particulars of the operations which were carried out at the County General Hospital as in previous years are given on page 12.

These figures show a large increase on the previous year in regard to Adhesion Section and Thoracoplasty.

Artificial Pneumothorax continues to be the first method of choice in lung collapse treatment and it was attempted on forty cases and successful in thirty-seven of them ; this is an increase of fifteen cases compared with 1942.

During the year a total of 103 patients (both in-patients and out-patients) were having refills and in all 1,801 were given, an increase of fifteen patients and 289 refills as against the previous year.

This is a moderately satisfactory position and it is now very rare for a patient to refuse this method of treatment ; I should like to see greater numbers of patients having the benefit of this method, but we can treat only those who are suitable and once again the cry must be for early diagnosis.

Statistics.

During the year ended 31st December, 1943, 471 patients have received treatment. Of these 160 were in residence on 31st December, 1942, and their treatment extended into 1943.

There have been 311 admissions, 148 men, 126 women and thirty-seven children (twenty-six Pulmonary and eleven Non-Pulmonary). There were 311 discharges during the year, and 160 patients in residence on the last day of the year.

X-Ray Department.

The following is a summary of the work carried out during the year :—

<i>In-Patients :</i>	..	..	Chest Photographs	..	..	806
			Bones and Joints Films	..	..	148
			Screenings	..	..	112
<i>Out-Patients :</i>	..	..	Chest Photographs	..	..	587
			Bones and Joints Films	..	..	—
			Screenings	..	..	85
<i>Staff :</i>	..	..	Chest Photographs	..	..	46
			Bones and Joints Films	..	..	4
			Screenings	..	..	—
<i>Sherwood Industries :</i>	..	..	Chest Photographs	..	..	26
			Bones and Joints Films	..	..	7
			Screenings	..	..	—

Post-Institutional After-Care.

(1). SHERWOOD VILLAGE SETTLEMENT.

Particulars of the progress made during the year are recorded in the following Report by the Medical Superintendent :—

“ Workshop.

Production throughout the year has been concentrated on children's cots, and has been very successful, both from the quality of the finished article, and the smooth working of the department. In all 2,908 cots were manufactured, and I think this is very creditable to the workshop foreman, Mr. Maltby and the settlers.

The average number of settlers employed throughout the year was sixteen.

Painting.

Only two settlers have been employed in this section, and although they have been kept fully occupied the volume of work has, of course, been diminished as compared with the previous year when four men were employed.

This section of the Settlement could easily be expanded, for the quality of the work is of such a high standard that we have many more orders than we can possibly fulfil.

Poultry.

This department continues unchanged, and one settler has been kept fully employed throughout the year.

General.

The married settlers still continue to be very contented in their houses; their gardens bear witness to their industry, and taking into consideration the nature of the soil they have achieved a splendid success.

The Men's Hostel was opened on January 17th, six men taking up residence, and on December 31st these had been increased to eighteen. On the whole the hostel has been a success, the men finding communal life interesting and not quite what they had expected.

Every effort is made to give an atmosphere of freedom and homeliness, and as few rules as possible have been introduced, but the men are expected to have due regard to their physical condition in the choice of their recreation.

During the year the Notts. Miners' Federation presented a full-size billiard table to the Hostel, and it has been much used and appreciated. A small library has been built up and facilities for various indoor games provided of which chess is the most popular.

Two settlers had to leave because of continued ill-health, this figure being the same as the previous year."

(2). DOMICILIARY ASSISTANCE.

In order to ensure, as far as practicable, that tuberculous patients and their families should not lack sufficient means with which to maintain a standard of living suited to their special needs, the Public Assistance Committee have continued to give special consideration to the needs of tuberculous patients and arrangements are in operation whereby the Public Assistance Officer and his Staff are systematically notified of such cases.

BLIND PERSONS ACTS.**Registration.**

The following statistics relate to the Registration of Blind Persons during the year 1943 :—

No. on Register on 1st January	..	..	..	629
No. added to the Register during the year	..	..	..	68
No. of deaths	..	..	..	42
No. who left the County	..	..	..	14
No. de-certified	..	..	..	6
No. remaining on Register at 31st December	..	..	..	635

Relief of the Necessitous Blind and Dependents.

The extent to which relief was afforded to blind persons and their dependents during the year was as follows :—

No. of blind persons in receipt of relief at the beginning of the year	..	..	..	411
No. receiving relief in respect of dependents	..	..	..	91
No. of blind persons in receipt of relief at end of year	..	..	..	439
No. receiving relief in respect of dependents	..	..	..	111
Total expenditure on assistance for blind persons and dependents	..	..	..	£21,476 16s. 4d.

Prevention of Blindness.

The work undertaken under Section 176 of the Public Health Act 1936, was as follows :—

No. of cases referred to Ophthalmic Surgeons	..	..	21
No. of new cases treated during the year	..	..	9

Treatment Afforded—

In-patient treatment only	..	..	..	1
In-patient treatment and out-patient treatment	..	..	..	7
Out-patient treatment only	..	..	..	1

Results of Treatment—

De-certified under Blind Persons Acts	..	..	..	2
Improved	..	..	..	6
No improvement	..	..	..	2
Still under treatment at end of year	..	..	..	5
No. of cases awaiting treatment at end of year	..	..	..	3

MENTAL DEFICIENCY ACTS.

The work carried out through the Mental Deficiency Service is indicated by the following abstract of the main statistics :—

No. of cases reported during year	.. .. .	134
Total number reported and verified since the re- organisation of the Service in 1933	.. .. .	2,451
Total number of known defectives at end of year	.. .. .	2,262
Incidence of mental defect per 1,000 of population	.. .. .	4.79
(Estimated incidence—Lewis Report : 8 per 1,000, 3,778)		
Number under Supervision at end of year	.. .. .	1,097
Supervision visits during year	.. .. .	3,316
Petitions presented and Orders obtained during year :		
Institution	.. .. .	15
Guardianship	.. .. .	8
Varying Orders	.. .. .	3
Place of Safety Orders	.. .. .	6
H.M. Secretary of State Orders	.. .. .	2
Number under Guardianship at end of year	.. .. .	105
,, in institutions—In-County	.. .. .	85
Out-County	.. .. .	247
,, on licence	.. .. .	38
,, discharged during year	.. .. .	3
Occupation Centre—Attendances during year (21 cases)	.. .. .	2,608
Home Teaching—Number visited	.. .. .	63
,, of visits paid during year	.. .. .	940

THE PREVENTION AND TREATMENT OF VENEREAL DISEASES.

Facilities for Treatment.

A new Treatment Centre at Worksop, referred to later in this section of the Report, was opened during the year. The County Council now provide treatment by means of three Centres, one at Nottingham, one at Mansfield, and the third at Worksop.

The Centres at Mansfield and Worksop are maintained and administered by the County Council and that at Nottingham by the City Council. County patients are treated at the latter Centre by arrangement, payment being made by the County Council on a pro-rata basis, according to the attendances made.

In addition to these Centres, female patients from the County area attend at the Out-Patient Department, Greendale House Hospital, Nottingham, which is owned by the City Council, payment being made on the same basis as in the case of the Nottingham Centre referred to above.

Arrangements have also been made under the Ministry of Health's General Practitioner Scheme for Dr. Mary Collis to undertake the treatment of cases of Venereal Disease on behalf of the County Council at Newark-on-Trent.

During the year the Nottingham Treatment Centre was removed to new premises.

Particulars of the days and times of sessions at the Mansfield, Nottingham and Worksop Treatment Centres are given below :—

MANSFIELD : West Hill Drive, Mansfield. Tel. : Mansfield 251.

MEDICAL OFFICERS' SESSIONS.

<i>Males.</i>		<i>Females.</i>	
Tuesday	10 a.m.—12 noon	Tuesday	2—4 p.m.
Thursday	6—8 p.m.	Wednesday	6—8 p.m.
		Thursday	10 a.m.—12 noon

INTERMEDIATE TREATMENT SESSIONS.

<i>Males.</i>		<i>Females.</i>	
Daily, Monday	10 a.m.—1 p.m.	Monday	{ 1-30—4-30 p.m.
to Friday	*6—8 p.m.		{ *6—8 p.m.
		Wednesday	1-30—4-30 p.m.
		Friday	{ 1-30—4-30 p.m.
			{ *6—8 p.m.

*During the months of November to March inclusive these Sessions are from 5—7 p.m.

NOTTINGHAM :

Males : “ Perth House,” Perth Street, off Glasshouse Street, Nottingham.

Females : “ Amberley House,” Glasshouse Street, Nottingham.
Tel No. : Nottingham 2351.

These Centres are open daily from 9 a.m. to 8 p.m., Monday to Friday, and 9 a.m. to 1 p.m. Saturday.

Medical Officers are in attendance at the following sessions :—

MEDICAL OFFICERS' SESSIONS.

<i>Males and Females.</i>	
Monday	{ 10 a.m.—12-30 p.m.
Tuesday	
Thursday	
Friday	{ 5-30—8 p.m.
Wednesday	
Saturday	
	{ 10 a.m.—12-30 p.m.

WORKSOP : Dispensary Buildings, Watson Road, Worksop.
Tel. No. : Worksop 2415.

MEDICAL OFFICERS' SESSIONS.

Males : Wednesday, 11-15 a.m. to 12-15 p.m.

Females : Wednesday, 10 a.m. to 11 a.m.

No intermediate treatment sessions are held at this Centre.

Treatment of County Cases at all Centres.

The number of cases resident in the County dealt with for the first time during each of the five years 1939-1943, together with the attendances made by all County cases at approved Treatment Centres, according to the returns received from the Mansfield, Nottingham, Worksop and Out-County Treatment Centres and in respect of the General Practitioner Scheme, were as follows :—

Year	No. of Cases Dealt with for the First Time.						Total Attendances (All Cases)
	Syphilis	Soft Chancre	Gonorrhoea	Total Venereal Infections	Non-Venereal and Undiagnosed Conditions	Grand Total	
1939	105	14	253	372	166	538	27,273
1940	60	3	218	281	159	440	20,343
1941	59	2	237	298	209	507	20,616
1942	70	2	226	298	233	531	19,709
1943	116	7	296	419	526	945	23,800

The numbers of the above cases which were dealt with at the Mansfield and Nottingham Treatment Centres respectively were as follows :—

Mansfield Treatment Centre.

Year	No. of Cases Dealt with for the First Time.						Total Attendances (All Cases)
	Syphilis	Soft Chancre	Gonorrhoea	Total Venereal Infections	Non-Venereal and Undiagnosed Conditions	Grand Total	
1939	53	11	144	208	67	275	16,557
1940	32	3	106	141	77	218	11,739
1941	20	1	113	134	86	220	12,131
1942	30	2	119	151	95	246	11,692
1943	36	2	133	171	176	347	12,785

Nottingham Treatment Centres.

(Glasshouse Street and Out-Patient Department,
Greendale House Hospital).

Year	No. of Cases Dealt with for the First Time.						Total Attendances (All Cases)
	Syphilis	Soft Chancre	Gonorrhoea	Total Venereal Infections	Non-Venereal and Undiagnosed Conditions	Grand Total	
1939	48	3	101	152	98	250	10,353
1940	26	—	104	130	79	209	8,196
1941	34	1	112	147	117	264	7,867
1942	36	—	98	134	131	265	7,463
1943	60	1	143	204	302	506	10,055

Mansfield Treatment Centre.

The number of new cases from all areas and the attendances made by all cases at the Mansfield Treatment Centre during the years 1939-1943 were as follows :—

Year	Syphilis		Soft Chancre		Gonorrhoea		Conditions other than Venereal		Totals		Grand Total
	M	F	M	F	M	F	M	F	M	F	
					NEW CASES.						
1939	39	16	11	—	97	58	46	24	193	98	291
1940	19	16	3	—	72	39	39	42	133	97	230
1941	14	10	1	—	70	52	49	51	134	113	247
1942	17	14	3	—	62	59	54	47	136	120	256
1943	22	16	3	—	62	82	106	87	193	185	378
					ATTENDANCES.						
			(a)	Medical Officers' Sessions.							
1939	2044	953	53	—	2089	2062	115	106	4301	3121	7422
1940	1661	1003	29	—	1326	1365	71	114	3087	2482	5569
1941	1053	876	1	—	1587	1502	124	139	2765	2517	5282
1942	1050	836	8	—	1450	1592	97	135	2605	2563	5168
1943	1083	1233	10	—	1161	2136	240	270	2494	3639	6133
			(b)	Intermediate Sessions.							
1939	237	20	151	—	5144	4339	91	126	5623	4485	10108
1940	73	39	34	—	3455	2986	29	88	3591	3113	6704
1941	28	18	3	—	4077	3579	76	57	4184	3654	7838
1942	32	22	8	—	3416	3554	21	28	3477	3604	7081
1943	56	31	1	—	2816	4479	70	91	2943	4601	7544

Provision of Additional Facilities for Treatment.

(i) WORKSOP TREATMENT CENTRE.

A new Treatment Centre was established at Worksop during the year in premises in Watson Road erected by the County Council for use as a Tuberculosis Dispensary and used for this purpose on one day a week only.

The Centre is open as follows and the Medical Officer in Charge, Dr. J. C. Buckley, is in attendance at each session :—

WEDNESDAY : Females .. 10 a.m. to 11 a.m.
Males .. 11-15 a.m. to 12-15 p.m.

The first session was held on the 8th December, 1943.

(ii) GENERAL PRACTITIONER SCHEME, NEWARK.

Arrangements were made during the year for Dr. Mary S. Collis of Newark to undertake the treatment of patients in the Newark area under the General Practitioner Scheme introduced in accordance with the suggestions of the Ministry of Health.

These arrangements came into operation on the 3rd June and the work undertaken by Dr. Collis during the period up to the 31st December, 1943, was as follows :—

Syphilis.		Soft Chancre		Gonorrhoea.		Non-Venereal or undiagnosed Conditions.		TOTAL	
No. OF CASES		SEEN		FOR THE FIRST		TIME DURING THE		YEAR.	
M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
—	6	—	—	—	4	1	11	1	21
M.		M.		TOTAL ATTENDANCES.		M.		M.	
F.		F.		M.	F.	F.		F.	
—	65	—	—	—	45	1	20	1	130

In-Patient Treatment.

Provision was made during the year whereby the full cost of maintenance of patients suffering from active infectious venereal disease admitted to the Mansfield County Institution and the County General Hospital, Worksop, on the recommendation of the Specialist Medical Officer devolved on the Public Health and Housing Committee, such treatment being provided free of cost to the patient.

Particulars of the number of patients who received treatment under these arrangements since their inception on the 1st April and up to the 31st December, 1943, are given below :—

Institution or Hospital.	No. of patients in on 1-4-43.	No. admitted.	No. discharged.	No. remaining under treatment on 31-12-43.
Mansfield County Institution	2	12	8	6
County General Hospital	—	7	5	2

In-patient treatment was also provided for County residents in Institutions not belonging to the County Council as follows :—

	No. of Patients.	
	Male.	Female.
Greendale House Hospital, Nottingham ..	—	15
City Hospital, Nottingham	1	—
Out-County Institutions	—	3

Defence Regulation 33B—Compulsory Treatment of Venereal Diseases.

In January, 1943, Circular 2727, issued by the Minister of Health, drew attention, *inter alia*, to the provisions of Defence Regulation 33B, which imposed upon the Medical Officer of Health of a County or County Borough the duty of keeping a record of all notifications received relative to persons named as suspected sources of infection and living in his area and upon receipt of information that two or more persons had been infected by the same person to require that person, unless it appeared unreasonable for him to do so on the information

given, to submit to medical examination by a Special Practitioner, defined under the Regulation, within a specified period and to furnish a certificate of compliance within ten days.

Subsequently, however, it transpired that it was the view of the Minister of Health that in addition all possible informal efforts should be made to persuade persons who had been named as the source of infection by one patient only to submit to medical examination and in December, 1943, Circular 2896 was issued authorising the Medical Officer of Health to disclose information obtained through the operation of Defence Regulation 33B for the purpose of bringing contacts under treatment and asking Local Authorities who had not already taken action except under the Regulation to give the necessary instructions to their Officers.

It was not until the above Circular had been considered by the County Council and instructions received that any informal action was taken on the receipt of a single notification.

Subsequently all the notifications received since the introduction of the Regulation were reviewed and in all instances in which reasonably adequate means of identification had been stated every effort was made through the medium of the Almoner Service to trace the persons named as suspected sources of infection.

The following summary shows the number of notifications received up to the 31st December, 1943, and the result, at the time of writing, of the action taken.

NOTIFICATIONS.

Total number of notifications on Form I received during the period from 8th January, 1943, to 31st December, 1943 ..	53
No. of above which related to Male Contacts	7
No. of above which related to Female Contacts	46

RESULT OF ACTION TAKEN.

	<i>Males</i>	<i>Females</i>
Instances in which no action taken as two contacts named on each notification ..	3	—
	(Notifications)	
Contacts not traced, including cases where identity not established	1	13
Contacts who were members of Armed Forces and notifications received previous to instructions that appropriate Military Authorities should be informed	2	—
Contacts who have been traced but who failed to attend for examination ..	—	12
Notifications transferred to Medical Officers of other Authorities in consequence of change of address (one of the contacts concerned attended at a Treatment Centre prior to removal)	—	2
Contacts who have been traced and who have attended for examination	1	17
	<u>7</u>	<u>44</u>

The remaining two notifications concerned females, the surname and address being identical in each instance. Only one person was, however, found at the address stated and she failed to attend for examination as a result of informal action. The evidence obtained was considered insufficient to justify formal action.

The above was the only instance in which there was reason to believe that a second notification had been received in respect of the same person.

The result of the examination of the eighteen contacts referred to above was as follows :—

	<i>Males.</i>	<i>Females.</i>
No. discharged as not suffering from Venereal Disease	1	6
No. found to be suffering from Gonorrhoea	—	8
No found to be suffering from Syphilis ..	—	3
	—	—
	1	17
	<u> </u>	<u> </u>

Of the eight female contacts found to be suffering from Gonorrhoea four have completed treatment and have been discharged, three are still under treatment, and one has been admitted to an approved institution.

As regards the three Syphilis cases two are still under treatment and one has completed treatment but has to attend for further blood tests.

Employment of Trained Almoners at Venereal Diseases Treatment Centres.

Following upon the receipt of Ministry of Health Circular 2834 it was decided in September, 1943, that immediately the services of the second Almoner already approved for the purpose of undertaking duties under the Scheme for the payment of allowances and grants to persons suffering from Pulmonary Tuberculosis could be secured, the duties of the Almoner Staff should be re-organised in order to allow part-time service to be undertaken at the Mansfield Treatment Centre and at the Worksop Treatment Centre, when established, and for follow-up work in connection with County patients in attendance at the Nottingham Treatment Centre to be carried out.

Unfortunately, however, considerable difficulty was experienced in obtaining a second Almoner and the post was not filled until the 31st January, 1944.

In consequence the arrangements did not become operative until the following month, the first attendance by an Almoner being made at the Mansfield Treatment Centre on the 14th February, 1944, and at the newly-established Centre at Worksop on the 16th February, 1944.

At the former Centre the Almoners do not undertake clerical work, but one Almoner attends on three half days each week in order to gather information regarding defaulters, and then pay the necessary home visits. The visiting which cannot be accomplished on the allotted days is subsequently fitted in with other outside duties.

The arrangements at the Worksop Centre, which provide for the attendance of an Almoner throughout the weekly Wednesday morning sessions for both sexes, enable contact to be made with the patients, clerical assistance to be afforded to the Medical Officer and defaulters to be noted for visiting. As in the case of Mansfield, follow-up cases who cannot be visited upon the same day are subsequently called upon in the course of other duties.

The Almoners have no direct duties at the Nottingham Treatment Centre, which is maintained and staffed by the Nottingham Corporation but undertake the necessary follow-up visits on information obtained from the Almoner Staff employed at the Centre with whom close co-operation is maintained.

Health Education.

In my introductory statement in the Annual Report for the year 1942 I explained that following the abolition of the British Social Hygiene Council and the transfer of educational work to the Central Council for Health Education a new Health Education Sub-Committee had been constituted for the purpose of co-ordinating and carrying out Health Education work.

The Sub-Committee as now constituted comprises representatives from three County Council Committees (Public Health and Housing, Maternity and Child Welfare and Education), six representatives from County District Councils (one from each of the four Boroughs, one for the Urban Districts and one for the Rural Districts), together with Dr. Isabel Powell Heath, Regional Officer of the Central Council for Health Education, Miss D. C. Johnson, Head Mistress of the Queen Elizabeth Grammar School for Girls, Mansfield, and Mr. H. C. Wiltshire, Secretary of the Nottinghamshire Rural Community Council.

During the year the programme of work undertaken included the showing of Venereal Diseases films to approximately 6,500 persons at factories in various parts of the County, lectures on Sex Hygiene to approximately 2,200 members of Youth Organisations, lectures or lectures and films on Venereal Disease to approximately 200 members of Women's Institutes, and lectures and films on the same subject to approximately 200 members of the Home Guard.

Leaflets relating to eight different subjects, which in the main were concerned with personal and social hygiene, were extensively distributed at the film shows and lectures.

The whole of the above programme was organised by Dr. Isabel Powell Heath in close collaboration with the County Medical Officer on behalf of the Health Education Sub-Committee.

In addition the new film issued by the Central Council for Health Education and entitled " Subject for Discussion " was shown in thirty-nine Cinemas in the County for periods of three or six days.

Wide publicity was also afforded during the year to the dangers arising from Venereal Diseases and the facilities available for free treatment by the display of 1,300 of each of the six pictorial posters in the series designed by the Central Council for Health Education.

In this connection I wish to acknowledge the ready co-operation which was afforded by the Medical Officers of Health of County Districts and by private employers.

Recognising the very great difficulty in maintaining effective continuity of Health Education work throughout the Administrative County and with only the very willing but limited assistance which Dr. Heath, in her capacity as part-time Officer of the Central Council for Health Education for the whole Region, could give, the County Council in July, 1943, approved the recommendation of the Health Education Sub-Committee that an Assistant Health Education Officer should be appointed on the Staff of the Public Health Department.

The post was duly advertised and although a large number of enquiries were received very few applications were submitted and no appointment was made.

In consequence, whilst the work undertaken was not as comprehensive or far reaching as could have been desired, it was nevertheless very considerable, particularly in view of the fact that apart from the very depleted staff already overburdened with other important work there was no-one available within the Department to handle it.

CONCLUSION.

In conclusion I wish to acknowledge gratefully the support which I have received from the Chairmen and Members of my several Committees, the loyal and devoted help of my Staff, and the ready assistance which has always been proffered by the Heads of other Departments.

I am, my Lords, Ladies and Gentlemen,

Your obedient Servant,

CHRISTOPHER TIBBITS.

TABLE 1. **TUBERCULOSIS.**
NEW CASES AND MORTALITY DURING 1943.

AGE PERIODS.	NEW CASES.				DEATHS.			
	PULMONARY.		NON-PULMONARY.		PULMONARY.		NON-PULMONARY.	
	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.
0—1 ..	—	1	1	—	—	1	1	—
1—5 ..	6	2	14	7	1	1	6	6
5—15 ..	20	11	27	14	2	1	5	4
15—45 ..	135	142	22	25	59	64	9	17
45—65 ..	54	23	2	5	49	14	2	1
65 and over ..	7	3	1	—	7	3	1	1
TOTAL ..	222	182	67	51	118	84	24	29

TABLE II.

Vital Statistics for the Year 1943.

DISTRICT	Death Rate (under 1 year of age)	Net Death Rate (all ages)	Death Rate from Pulmonary Tuberculosis per 1,000 of population	Death Rate from ALL Tuberculous Diseases per 1,000 of population
Boroughs and Urban Districts.				
MANSFIELD (Borough)	55	11.5	0.48	0.54
WORKSOP (Borough)	57	10.4	0.32	0.46
NEWARK (Borough) ..	52	12.4	0.37	0.37
EAST RETFORD (Borough)	17	13.6	0.57	0.69
ARNOLD	50	12.3	0.11	0.22
BEESTON AND STAPLEFORD	35	10.0	0.64	0.96
CARLTON	34	12.0	0.58	0.68
EASTWOOD	33	14.7	0.72	0.84
HUCKNALL	49	10.6	0.34	0.53
KIRKBY-IN-ASHFIELD	60	11.5	0.73	0.95
MANSFIELD W'DHOUSE	51	10.3	0.27	0.33
SUTTON-IN-ASHFIELD	67	11.2	0.36	0.48
WARSOP	45	10.0	0.40	0.40
WEST BRIDGFORD ..	44	13.7	0.51	0.56
Totals for Urban Districts	48	11.5	0.46	0.59
Rural Districts.				
BASFORD	50	11.4	0.50	0.59
BINGHAM	44	12.9	0.30	0.30
WORKSOP	38	8.2	0.27	0.27
EAST RETFORD ..	43	11.1	0.35	0.50
NEWARK	44	11.7	0.29	0.48
SOUTHWELL	35	9.2	0.25	0.30
Totals for Rural Districts	43	10.7	0.35	0.43
WHOLE ADMINISTRA- TIVE COUNTY	47	11.24	0.43	0.54

TABLE III. NOTTINGHAMSHIRE. Abstract of Vital Statistics.

Year.	Estimated Population at the middle of the year.	Excess of Births over Deaths.	Persons per Acre.	Separate Families.	Persons per Family.	Registered Births.	Births per 1,000 of the Population.	Deaths under 1 year per 1,000 Births.	Net Deaths.	Net Death Rate per 1,000 of the Population.
1899	265,952	3891	.51	..	..	8266	31.0	161	4375	16.4
1900	270,862	3675	.52	..	..	8292	30.6	160	4617	17.0
1901	275,971	4497	.53	59,755	4.6	8636	31.3	145	4139	14.9
1902	282,563	4804	.54	..	..	8920	31.5	138	4116	14.5
1903	289,001	4926	.55	..	..	9072	31.3	134	4146	14.3
1904	295,586	5086	.56	..	..	9379	31.7	139	4293	14.5
1905	302,321	4389	.57	..	..	8880	29.3	126	4491	14.8
1906	309,209	4849	.59	..	..	9088	29.3	121	4239	13.7
1907	316,355	4412	.60	..	..	8962	28.3	127	4550	14.3
1908	323,461	5358	.62	..	..	9818	30.3	119	4460	13.7
1909	330,831	5316	.63	..	..	9740	29.4	106	4424	13.3
1910	338,937	5223	.64	..	..	9554	28.2	110	4331	12.7
1911	345,930	4903	.66	76,236	4.5	9453	27.3	125	4550	13.1
1912	355,046	5007	.68	..	..	9213	25.9	93	4206	11.8
1913	362,307	4934	.69	..	..	9369	25.8	101	4435	12.2
1914	367,617	4845	.70	..	..	9541	25.9	107	4606	12.7
1915	353,193	3775	.67	..	..	8843	25.0	112	5068	14.3
1916	344,501	4126	.66	..	..	8567	22.8	95	4441	12.8
1917	344,822	3372	.66	..	..	7589	19.7	95	4217	12.2
1918	339,456	1725	.65	..	..	7742	20.3	100	6017	17.7
1919	366,331	2948	.70	..	..	7507	19.6	95	4559	12.4
1920	380,928	5667	.73	..	..	9836	25.8	85	4169	10.9
1921	381,969	4774	.73	85,646	4.4	9187	24.1	86	4413	11.5
1922	386,130	4177	.74	..	..	8316	21.5	69	4139	10.7
1923	388,019	3763	.74	..	..	8023	20.6	77	4260	11.0
1924	391,700	3715	.75	..	..	8085	20.6	79	4370	11.2
1925	393,400	3373	.75	..	..	7921	20.1	77	4548	11.6
1926	398,900	3310	.75	..	..	7739	19.4	73	4429	11.1
1927	408,100	2984	.78	..	..	7613	18.6	69	4629	11.3
1928	422,700	3549	.81	..	..	7941	18.8	64	4392	10.4
1929	429,300	2242	.82	..	..	7517	17.5	76	5095	11.8
1930	439,400	3261	.84	..	..	7746	17.6	62	4485	10.2
1931	447,900	2617	.86	*109,674	3.9	7695	17.2	72	5078	11.3
1932	451,600	2821	.86	..	..	7534	16.7	66	4713	10.4
1933	444,970	2036	.86	..	..	6945	15.5	68	4909	10.9
1934	448,500	2395	.87	..	..	7042	15.7	54	4647	10.4
1935	453,500	2382	.86	..	..	7083	15.6	56	4701	10.4
1936	459,000	2005	.88	..	..	7033	15.3	58	5028	10.9
1937	465,800	2218	.89	..	..	7318	15.7	59	5100	10.9
1938	470,900	2796	.90	..	..	7549	16.0	46	4753	10.1
1939	^a 478,200 ^b 479,900	2511	.91	..	..	7847	16.4	51	5336	11.1
1940	483,240	1735	.92	..	..	7610	15.7	58	5875	12.2
1941	492,750	2501	.94	..	..	7954	16.1	62	5453	11.1
1942	481,200	3755	.92	..	..	8659	18.0	48	4904	10.2
1943	472,300	3946	.90	..	..	9255	20.2	47	5309	11.2
For Comparison—										
1943	England and Wales ..				..	..	16.5	49	..	12.1
	126 County Boroughs and				..	..	18.6	58	..	14.2
	Great Towns including London				..	..	19.4	46	..	12.7
	148 Smaller Towns ..				..	..	15.8	58	..	15.0
	LONDON (Administrative C'nty)				..	..		

*Adjusted figures owing to alteration in area under the Nottingham Corporation Act, 1932, as from the 1st April, 1933.

^a Population figures for calculation of Birth rates.

^b Population figures for calculation of Death rates and incidence of notifiable diseases.

TABLE IV. Causes of Death at Different Periods of Life in the Administrative County of Nottingham, 1943.

CAUSES OF DEATH.	Sex	AGGREGATE OF URBAN DISTRICTS							AGGREGATE OF RURAL DISTRICTS							Total for Co'ty
		All Ages	0—	1—	5—	15—	45—	65—	All Ages	0—	1—	5—	15—	45—	65—	
ALL CAUSES ..	M	2013	173	44	33	222	533	1008	789	65	23	10	76	158	457	5309
	F	1778	145	40	30	218	384	961	729	49	16	9	80	157	418	
Typhoid and Paratyphoid Fevers ..	M	..	..	..	..	..	..	..	1	..	..	..	1	..	..	1
	F	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Measles ..	M	9	3	5	1	..	..	..	..	..	..	..	..	..	..	20
	F	8	3	4	1	..	..	..	3	1	..	1	1	..	..
Scarlet Fever ..	M	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1
	F	..	..	..	..	..	..	..	1	..	1	..	..	..	..
Whooping Cough ..	M	4	..	3	1	..	..	..	2	1	..	1	..	..	..	12
	F	4	3	1	..	..	..	..	2	..	2	..	..	..	..
Diphtheria ..	M	7	..	1	6	..	..	..	1	..	1	..	..	..	..	15
	F	6	..	2	4	..	..	..	1	..	..	1	..	..	..
Influenza ..	M	47	..	..	..	2	15	30	28	1	..	..	1	11	15	162
	F	56	3	2	1	10	8	32	31	..	1	..	..	7	23	
Acute Infantile Encephalitis ..	M	2	..	..	..	1	1	..	1	..	..	..	..	1	..	4
	F	1	..	..	..	..	..	1	..	..	..	..	..	..	..
Cerebro-Spinal Fever	M	5	..	3	..	2	..	..	..	..	..	..	..	..	..	11
	F	5	2	..	1	2	..	..	1	1	..	..	..	..	..
Tuberculosis of Respiratory System ..	M	92	..	1	2	46	39	4	26	..	..	..	13	10	3	202
	F	60	..	1	..	46	12	1	24	1	..	1	18	2	2	
Other Tuberculous Diseases ..	M	20	1	5	5	6	2	1	4	..	1	..	3	..	..	53
	F	22	..	6	3	12	..	1	7	..	..	1	5	1	..	
Syphilis ..	M	10	1	..	..	3	5	1	4	..	..	..	2	1	1	18
	F	3	1	..	..	..	1	1	1	..	..	..	..	..	..
Ac. Polio-myelitis and Polio-encephalitis ..	M	3	..	1	1	1	..	..	..	..	..	..	..	..	..	4
	F	1	..	1	..	..	..	..	..	..	..	..	..	..	..
Cancer, Malignant Disease ..	M	265	..	..	..	21	101	143	74	..	..	..	3	26	45	705
	F	257	..	..	1	27	114	115	109	..	..	1	9	46	53	
Diabetes ..	M	13	..	..	..	..	6	7	3	..	..	..	..	1	..	49
	F	23	..	..	..	1	4	18	10	..	..	..	3	3	4	
Heart Disease ..	M	461	..	..	..	24	105	332	202	..	..	..	3	30	169	1219
	F	389	..	..	2	27	81	279	167	..	..	1	6	24	136	
Intra-cranial Vascular Lesions ..	M	173	1	..	..	5	53	114	76	..	..	..	..	12	64	560
	F	225	..	..	..	3	58	164	86	..	..	..	2	15	69	
Other Circulatory Diseases ..	M	53	1	..	..	..	15	37	24	..	..	..	..	3	21	130
	F	38	..	..	..	2	6	30	15	..	..	..	..	2	13	
Bronchitis ..	M	149	9	1	1	12	40	86	51	3	1	1	1	15	30	348
	F	108	9	1	..	8	11	79	40	..	..	..	1	10	29	
Pneumonia ..	M	125	39	7	1	11	29	38	34	12	4	1	3	2	12	275
	F	91	24	10	1	3	18	35	25	9	4	..	..	5	7	
Other Respiratory Diseases ..	M	37	..	1	2	9	11	14	6	..	..	..	1	3	2	79
	F	27	..	..	..	6	6	15	9	1	..	..	2	3	3	
Ulcer of Stomach or Duodenum ..	M	39	..	..	..	9	25	5	4	..	..	..	..	2	2	56
	F	9	..	..	..	1	4	4	4	..	..	..	1	2	1	
Diarrhoea under two years ..	M	11	11	..	..	..	..	..	4	4	..	..	..	..	..	31
	F	13	12	1	..	..	..	..	3	3	..	..	..	..	..
Appendicitis ..	M	9	..	1	1	2	4	1	4	..	..	..	..	1	3	23
	F	7	..	1	1	3	2	..	3	1	..	1	..	..	1	
Other Digestive Diseases	M	30	4	2	..	2	7	15	16	..	..	..	1	3	12	105
	F	41	4	..	1	5	17	14	18	1	..	..	2	6	9	
Nephritis ..	M	41	..	..	1	6	12	22	20	..	..	..	3	5	12	105
	F	34	..	..	1	9	6	18	10	..	..	..	1	4	5	
Puerperal Sepsis ..	F	3	..	..	..	3	..	..	7	..	..	..	7	..	..	10
Other Puerperal Causes	F	14	..	..	..	14	..	..	3	..	..	..	3	..	..
Premature Birth ..	M	38	38	..	..	..	..	..	25	25	..	..	..	..	..	123
	F	51	51	..	..	..	..	..	9	9	..	..	..	..	..
Congenital Debility, Malformations, etc.	M	49	44	2	..	3	..	..	15	11	2	1	1	..	..	114
	F	31	26	2	..	3	..	..	19	16	2	..	..	1	..	
Suicide ..	M	14	..	..	..	5	5	4	5	..	..	..	1	3	1	33
	F	7	..	..	..	3	3	1	7	..	..	..	1	6	..	
Road Traffic Accidents	M	32	..	4	5	8	5	10	17	..	2	1	10	4	..	69
	F	15	..	2	3	7	2	1	5	..	1	..	3	..	1	
Other Violence ..	M	82	6	4	4	29	25	14	53	5	4	2	25	15	4	179
	F	32	2	4	3	3	4	16	12	2	1	..	3	..	6	
All Other Causes ..	M	193	15	3	2	15	28	130	89	3	8	3	4	10	61	576
	F	197	5	2	7	20	27	136	97	4	4	2	12	20	55	

